



THE MUMMY'S CURSE: MOLD

BY BRENDA HARDWICK
SAFETY & LOSS CONTROL SPECIALIST

Remember "The Curse of the Pharaohs"? When Tutankamen's tomb was first opened, the workers, archaeologists and others present got sick and died shortly afterwards. Rumor had it the tomb was cursed and these people had succumbed to the curse, shrouding the dig in mystery and fear.

Scientific investigation determined that the tomb, mummy and other items removed were covered in... MOLD! Now THAT's an Indoor Air Quality problem! The mold was heaviest in the wrappings on the mummy. Of course the mummy was dead, but the mold was not - it was just dormant. Mold does not die when it runs out of food and moisture, but "goes to sleep," sometimes for millions of years. There was so much mold spore in the tomb that when it was opened those rushing to get inside got hit with a full dose of the stuff. Once inside their nasal passages and lungs where the mold spores received moisture and a food source, it became active, leading to illnesses and death. So much for curses.

Mold. The word itself has come to mean trouble, illness and bad news. The real trouble with mold is that it is EVERYWHERE! You can grow it yourself and everyone does; in the refrigerator, bathroom and laundry room, for example. Mold is older than dirt... or maybe I should say as old as dirt, because it NEEDS dirt, (a food source), heat, darkness and moisture in order to grow. These are the key ingredients to successfully growing your own bumper crop of mold anywhere.

Now you're wondering, "If mold is everywhere, why is it such a big deal? Why is it causing so much trouble TODAY?"

Consider:

- There are no regulatory rules or governing body charged with the responsibility for monitoring mold or "standards" for sampling, interpreting data, or measuring exposure. Why? Standards are not considered practical due to differing sensitivities. Every individual has a different mold tolerance level. What makes you sneeze might not make me sneeze

and what makes me sneeze might make you sick.

- Changes and growth in building construction have increased the growth potential for mold. Mold LOVES to eat some of the new materials being used in construction. New construction techniques now enable work to continue during what used to be the off-season of winter, so buildings are finished earlier. This means that when it rains or snows the potential for moisture to get trapped in building materials is increased.
- People are better educated today and the Internet, cable and satellite TV have created more awareness of this health hazard.
- Mold costs insurance companies, builders, homeowners, school districts and municipalities millions of dollars for clean up, lawsuit defense and settlements.

Can we get rid of mold? Perhaps we should ask: Do we WANT to get rid of mold? Some mold is harmful but

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APRIL SRMAG TOPIC: MOLD

Please mark your calendars for **April 22, 2004 at 1:00 pm** The State Risk Management Action Group (SRMAG) will be meeting at Pinnacle Assurance's offices located at 7501 E. Lowry Blvd and the topic is "Mold."

Several well known and knowledgeable speakers will address the subject and attendees will also see a live demonstration from Colorado's only registered dog from Mold Dog MD™ who is trained to sniff out mold. Speakers will cover insurance exclusions and how Indoor Air Quality complaints are handled.

Hope to see you there!

BULLETIN NEWS BRIEFS

- Registration for the 2004 STAR Awards Luncheon is now available online www.colorado.gov/dpa/dhr.
- Director's Administrative Procedures, which were considered at a rulemaking hearing on February 5, 2004, have been adopted by the Director and sent to the Secretary of State for publication. These procedures will be effective on May 2, 2004. For more information contact Pat Romero at 303-866-5383 or pat.romero@state.co.us.
- The State Personnel Director will hold a public hearing on Monday, May 17, 2004, to consider adoption of permanent administrative procedures pertaining to reinstatement, holiday leave and housekeeping changes. For more information contact Pat Romero at 303-866-5383 or pat.romero@state.co.us.
- The draft survey process for the FY 2005-2006 annual compensation survey has been published. Two meet and confer sessions were held on March 16, 2004, at 1313 Sherman Street, Denver, in room 318. All state employees are invited to give input regarding the selection and utilization of surveys used in the annual compensation process. Any written comments must be received by April 16, 5:00 pm and may be sent to job.eval.comp@state.co.us.

To learn more about these and other human resources, risk management, benefits, and C-SEAP policies and issues, go to www.colorado.gov/dpa/dhr ("News") and be sure to check the "News Archive" section under "Quick Links."

457 PLAN NOTICE OF ELECTION

Pursuant to CRS 24-52-102, the 457 Deferred Compensation Committee (governing body) will be conducting an election to fill two seats on the Committee. One seat shall be for a one-year term and the other seat shall be for a four-year term both beginning July 1, 2004. If only two candidates apply, the Committee may determine, after discussion with the candidates, which candidate will fill the vacant terms. Employees interested in seeking election should call the Employee Benefits Unit to request an election packet. Contact Vince Plymell at 303-866-3609 or vince.plymell@state.co.us.

Election Requirements

Active state employees and retirees (subject to SB04-107) who participate or have an account balance in the plan, whether or not currently deferring to the deferred compensation plan, may seek candidacy.

To seek candidacy you must obtain the election packet that contains a complete set of election rules, nomination petition and biographical sketch form. In order to qualify as an eligible candidate you must obtain nominating signatures of five (5) plan participants. Signatures must be obtained on nomination petitions provided in the election packets.

The Employee Benefits Unit must receive signed petitions and biographical sketches no later than 4 pm, Tuesday, May 18, 2004.

If more than two candidates are nominated, ballots will be mailed to all Plan participants the week of June 7, 2004.

There may also be the opportunity to vote via the website at www.colorado457.com.

*Effective July 1, 2002, the 457 Deferred Compensation Committee was granted additional fiduciary responsibility over the 401(a) Elected and Appointed Officials Defined Contribution Pension Plan (DCPP) {CRS 24-52-201-206}.

Committee Members as of April 1, 2004

Elected Members

F. David Loomis – Department of Revenue, Committee Chairman (vacant one-year term, expires June 30, 2005)
Billy Kwan – Public Utilities Commission, Vice Chair
Joann Vondracek – Department of Treasury
Richard Moore – Department of Corrections (four-year term expires June 30, 2004)

Statutory Members

Arthur Barnhart – State Controller
Senator Mark Hillman – Treasurer's designee
Governor's Appointee – Elected Officials Plan (vacant)
Senator Richard Mutzebaugh
Representative Dale Hall

As a reminder, the 457 Committee meets monthly on the second Thursday of the month at 1313 Sherman Street, Room 318. Please contact Vince Plymell at 303-866-3609 for more information as meeting dates, times and locations are subject to change. Also visit the 457 website at www.colorado457.com for agendas and approved meeting minutes.

INSURANCE COVERAGE AND CAMPUS LIFE

BY BETTY CRIST
STATE OFFICE OF RISK MANAGEMENT

Over the years, the State Office of Risk Management (SRM) has received many inquiries regarding insurance coverage for campus clubs and assorted class or campus life activities. In addition, participants in these activities have filed several injury claims.

SRM manages liability claims filed pursuant to the terms of the Colorado Governmental Immunity Act. This Act is quite limited in its waiver of sovereign immunity for damage/injury situations. Liability protection is provided for state departments, state employees and "authorized volunteers", but this protection does not extend to students or members of clubs who organize activities for their members or other individuals.

Authorized volunteers are individuals who perform an act for the benefit of a public entity, at the request of, and subject to the control of the public entity. The State Claims Board passed a resolution some years ago stating

that the term "authorized volunteer" does not generally include extracurricular activities such as biology clubs, rodeo clubs, boxing clubs, sky-diving clubs and other similar organizations, even though they may be sanctioned by the school or department in question. The key part of this definition is "who performs an act for the benefit of a public entity." The Board's decision was based on the voluntary aspect of membership in clubs or similar organizations, as well as their belief that participants received the primary benefit of these activities.

When an accident occurs and a damage or injury claim is presented against the state, SRM and its adjusters must determine if protection is available to the club, volunteer or employee, in accordance with the terms of the Act. That determination is not made by the involved state agency. If the statute does not provide protection, the

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others we cannot live without. If we somehow found a way to kill all mold there would be no cheeses or Penicillin; no mushrooms (which are a kind of fungus or mold); and no yeasts, which are used in bread and beer.

As you can see, things that are good can also be bad, and mold is just one of them. If you get too much, it can hurt, or even kill.

If you're asking, "How can we keep mold from growing to the point that it is a problem?" Consider these options:

- Before buying or moving into a home, regardless of its age, inspect it for mold. The least costly inspection is a thorough walk-through simply looking and sniffing for evidence of mold - under sinks, in closets, the attic, basement, and window wells, inside and out. Look for signs of water damage such as ceiling or wall stains, cracks in mortar around windows, dampness in the basement and basement windows. If in doubt, you can even hire a "mold-dog" to sniff it out - but that won't be cheap! Usually, you will see evidence of moisture and also smell it. That musty, earthy, potato-cellar smell tells you mold is growing somewhere.
- When building a new home, make frequent trips to the construction site and ASK QUESTIONS: "Are you going to seal the windows in place? (Except for the air circulation holes of course!) If it rains, will you let the materials dry before putting in the insulation? When the drywall is hung inside will

you leave a gap at the bottom for air to circulate?" Make certain that foundations are properly graded. Check again after a few weeks since dirt settles!

- Control humidity in buildings: less is better than more. Increase ventilation: use available exhaust fans when cooking, dishwashing, cleaning, and bathing; add insulation; plan landscaping carefully (sprinklers should not hit the side of any building), fix plumbing leaks A.S.A.P., and be sure the area is thoroughly dry before closing it off again.
- Positive pressure and venting bathrooms, dryers and other moisture-generating sources to the outside can reduce moisture in office buildings. Humidity should be kept at less than 50%.
- If money is no object, consider adding UV lights to the HVAC system. UV kills mold and the mold won't return as long as the area is kept dry after treatment.

Some insurance companies are now excluding coverage for mold damage since it is so expensive to pay these claims. Unfortunately, this means consumers are left to pay the bills for removal and repair of mold damage themselves.

Remember, if you have an Indoor Air Quality issue, whether at work or at home, unless you can see and smell it, mold is probably not the problem. Mold is part of our very existence on good old Mother Earth.

To know more about what the state is doing regarding mold, plan to attend the SRMAG meeting on April 22, 2004 at 1:00 pm at Pinnacol Assurance's offices located at 7501 E. Lowry Blvd.

WHAT IS HEPATITIS C AND WHAT IS ITS IMPACT ON THE WORKFORCE

BY MARY FENTON, LCSW
C-SEAP

What is Hepatitis C? Why has it reached epidemic proportions and how is it contracted? What is the treatment and projected outcome for the infected population? What can be expected for an employee who is diagnosed and receiving treatment?

Hepatitis C may at first sound like a topic that belongs exclusively in the physician's exam room, but in fact, this epidemic is an enormous challenge to the public health, with multiple implications for both public and private employers. Hepatitis C is having a significant impact on the American workplace, the health care system at all levels, and the corrections system. Both the symptoms of the illness itself, and the side effects of treatment for the illness, may be extremely debilitating, adversely impacting the individual in all aspects of his/her life, including professional functioning. Economic impacts of the illness are substantial: average lifetime medical costs for individuals with Hepatitis C have been estimated to be approximately \$100,000 per patient, with additional costs of \$280,000 per patient if liver transplantation is required. Annual national health care costs related to Hepatitis C are estimated to be as high as \$9 billion. A discussion of some of the particulars of this serious condition follows.

There are 5 types of Hepatitis (A through E). The word hepatitis means inflammation of the liver, (hepa-liver & itis-inflammation) The liver is the largest human organ and has many functions. It is vital to life, as it produces substances that break down fats, makes certain amino acids that are the building blocks of protein, and filters harmful substances such as alcohol, which can cause serious liver damage, as it obstructs normal metabolism of protein, fats and carbohydrates. It also stores essential vitamins and minerals. Thus, diseases of the liver are of the utmost importance to medical science. The focus of this article is Hepatitis C, a viral infection that was discovered in the late 1980's. In a recent guide to gastrointestinal health, Robert Stoler, M.D. states Hepatitis C, (HVC) is " a significant public health problem." (12-09-2003) It was, and remains undetected in vast numbers of people. Currently, there are 2.7 million Americans who are chronically infected.

HVC is a blood borne virus, (contracted through blood and blood products). It is associated with a spectrum of liver disorders ranging from mild chronic hepatitis to progressive cirrhosis and liver cancer. It is now the leading reason for liver transplantation in the U.S. Aside from severe liver damage, HCV can be fatal. In some

individuals, it can go undetected and not cause any lasting damage. In others, the diagnosis may be too late. Many factors determine the course and there is still much research underway to learn more about this sometimes-deadly virus. According to a leading pharmaceutical company, Hoffman-LaRoche, it is the "most common virus in the U.S.A." Some of the known facts about the infection follow.

HVC is usually chronic, (prolonged) and may have been contracted anywhere from 10 to 30 yrs. prior to diagnosis. Common transmission routes include blood transfusions before 1992, (blood banks and hospitals began routine screening after 1992), needle stick accidents among healthcare workers, use of unclean needles among illicit drug users, unprotected sex with infected partners and tattoo and body piercing. This viral infection is only contagious through the exchange of blood or blood products. There is no preventative vaccine for HVC. The only precautions are to avoid behaviors like sharing drug needles, or sharing personal items like toothbrushes or razors with an infected person. Healthcare workers need to practice precautionary measures to avoid accidental needle sticks. Dr. Stoller also states that "high risk sexual behavior is a risk factor, however, the risk of sexual transmission is low, particularly in monogamous relationships." Unprotected sex with multiple partners and risky sexual practices increase the chance of infection.

The symptoms of HVC vary among individuals. Some will have distinct symptoms, but the majority of individuals have none, or mild signs that go unnoticed. The epidemic proportions have arisen from the fact that so many people are unaware they have HVC until an incidental blood screening indicates abnormal liver enzymes or the mild symptoms amplify. Common symptoms are fatigue, aches and fever, stomach pain or pain from the liver (located under the right lowest chest ribs), weight loss and jaundice (yellowish tinge to skin and whites of eyes).

The only medical treatment for HVC is a form of chemotherapy combining injections and oral medication for periods of six months to one year. The once-a-week injectable medication is called Peginterferon and the oral medication taken daily is called Ribavirin. The decision of whether to treat HVC and the duration of treatment depend on factors like persistent, elevated, abnormal liver enzymes and chronic hepatitis or beginning

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EMPLOYEE BENEFITS FIELDS QUESTIONS ABOUT HEALTH SAVINGS ACCOUNTS

BY VINITA BIDDLE, CEBS
EMPLOYEE BENEFITS UNIT

When the Medicare Prescription Drug Improvement and Modernization Act of 2003 was signed into law on December 8, 2003, it created, among other things, a new type of tax-favored account—a Health Savings Account—to help eligible individuals with qualifying high-deductible health plans save for medical and retiree health expenses.

Health Savings Accounts (HSAs) have drawn a great deal of interest; primarily because they are uniquely attractive tax shelters. The tax advantages are significant. Contributions to an HSA are not taxed (subject to limits), HSA earnings are exempt from tax, and HSA distributions used to pay for qualified medical expenses are tax-free. Fund balances carry forward from year to year and account holders may use their accounts to fund the purchase of health benefits not offered by their employers, including long-term care and post-retirement medical insurance premiums.

To establish and contribute to an HSA, an individual: (1) must be covered by a qualified High-Deductible Health Plan (HDHP); (2) cannot be covered by any other health plan; (3) cannot be claimed as a dependent on another person's tax return; and (4) cannot be entitled to Medicare.

The qualified HDHPs that eligible individuals are required to have before they can contribute to an HSA are very different from the comprehensive health insurance plans that cover most employees today. None of the State's current health plans qualify, not even the PPO with its \$2000 deductible. However, it is expected that most major carriers will eventually offer qualified HDHPs and Employee Benefits anticipates including a request for an HDHP option with the next Request for Proposals.

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cirrhosis (scarring of a diseased liver) found by liver biopsy. Infected people with decompensated liver functioning or consistent normal enzyme levels are not treated. They are, however, watched closely for any progression. The end point of successful therapy is a "sustained response" six months after the end of treatment. (Robert Stoller, M.D.) Sustained response refers to the absence of infection, over time. This combination treatment is still too new to provide long-term projections of success.

There are numerous, serious side effects for individuals undergoing treatment for HVC. They include chills, fever, muscle aches, fatigue, headache, depression and suicide, sleep disturbances, cough, bone marrow suppression, anemia, hair loss, skin rash, and inflammation at the injection site. Treating physicians will discuss all of these side effects with the patient. Close monitoring is indicated, as many of the side effects become present at different and unpredictable intervals of treatment.

Individuals who are being treated for HVC may or may not be able to maintain a normal work schedule. Employees may need to be off work for the longest period of 48 weeks of treatment and for individualized periods of time after the treatment, as it takes time for the medications to be fully out of the body and to recover. Other employees may better tolerate the side effects or they may be minimal. Many factors will contribute to each person's course of treatment, including the type of work he or she performs. If the individual performs a very physically demanding job and he/she experiences

severe treatment side effects, he/she may be unable to perform their job functions. Other factors include age and prior physical and emotional health. As with any illness, be it emotional or physical or a combination of both, the most important thing we, as coworkers, can do is offer support and understanding. Some of the devastating emotions associated with critical illness are fear, anger, anxiety and despair. These responses are not easy for the infected person or for concerned coworkers. If flexibility and kind consideration are offered, the course will be much smoother for all concerned.

As always, C-SEAP counselors are available for employees and supervisors, and only a phone call away. Don't hesitate to make the contact by calling 1-800-821-8154, statewide, and 303-866-4314 for the main Denver office.

For more information about viral hepatitis:

American Liver Foundation
75 Maiden Lane, Suite 603
New York, NY 10038
Phone: 800 GO- LIVER (465-4837)
Internet: www.liverfoundation.org

Centers for Disease Control and Prevention
National Center for infectious Diseases
Hepatitis Branch
1600 Clifton Rd.
Atlanta, GA 30333
Phone: 888 443-7232
www.cdc.gov/ncidod/diseases/hepatitis

ANNUAL RISK MANAGEMENT REPORT GOING TO STATE MANAGERS

By PHIL SAVAGE
SAFETY & LOSS CONTROL SPECIALIST

The mission of the State Office of Risk Management is to protect the state's assets through management of loss exposures and claims, and by advocating loss prevention techniques and programs. As one component of this effort, SRM is pleased to announce that annual reports for FY 2002–2003 soon will be in the hands of managers at each State Department or Institution of Higher Education. Release of the reports is scheduled for April 15. These reports summarize the risk management performance of each state entity over the past four years, as of 07/01/2003. Encompassing information on property losses, liability claims and workers' compensation injuries, the annual report consists of two parts – a narrative and a graphics section.

The narrative provides a summation of loss trends and other information key to each component of the state risk management program, and includes recommendations designed to assist each state entity in planning for future safety and loss prevention activities specifically tailored to its needs. Also included in the narrative is information about training availability and instructions for scheduling the training.

The graphics portion of the report consists of charts that reflect the organization's losses in the three risk management program areas of liability, property and workers' compensation. Another feature of the report is a comparison of the agency's loss experience to that of other agencies of similar size and mission.

The annual report will be provided to Executive Directors and Presidents of Higher Educational Institutions, as well as other key personnel. Risk Management data has been distributed in a different format in the past, so the '02-'03 document is a new feature of the SRM program. To assist us in further refinement of this communication effort, a report evaluation form will accompany the document. Data obtained from this evaluation will assist the Risk Management staff in its development of future reports.

For more information contact the State Risk Management Office at 303-866-3848.

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claimant would then turn to the organization's commercial insurance and, lacking that, be forced to utilize his own medical or property insurance for recovery of costs associated with the damage or injury. In some cases involving club or student use of a state vehicle, the liability could lie with the driver's own personal insurance since the driver would not be a state employee or authorized volunteer as defined by the Claims Board. In addition, passengers in state vehicles must use their own medical insurance or personal financial resources when injured, unless covered by workers' compensation or other sources. Every claim is evaluated on its own merits and there may, of course, be some exceptions to the general rules related to club and student activities.

Risk Management continues to urge that clubs and other campus organizations be made aware of the financial exposure related to their activities and that they be advised to seek commercial insurance to protect the organization. Serious accidents do sometimes occur as a result of these activities and it is wise to be well protected. When in doubt about protection, Risk Management is always eager to evaluate the situation and provide whatever assistance possible and the state insurance broker will assist with the purchase of needed insurance coverage.

PERSONAL SERVICES CONTRACTS TRAINING SCHEDULE

Level I

Denver

August 26

1313 Sherman Street, Room 220

8:30 am – 4:30 pm

Ft. Morgan

September 30

Morgan Community College, Founders Room

8:30 am – 4:30 pm

Level II

Denver

July 29

1313 Sherman Street, Room 220

8:30 am – 4:30 pm

Pueblo

September 9

Colorado State University - Pueblo, Blue Spruce Room
(#204) in the Occhiator University Center

8:30 am – 4:30 pm



EMPLOYMENT LAW SEMINAR

Federal Laws have a significant impact on how employers do their job, and Federal Employment Law is constantly changing. EMPLOYMENT CLAIMS CONSISTENTLY ACCOUNT FOR ONE OF THE COSTLIEST FORMS OF LITIGATION FOR THE STATE. Those responsible for the application and implementation of employment laws MUST maintain a current working understanding of how these laws impact what they do.

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Learn and understand the key Federal Employment Laws and Regulations | <input checked="" type="checkbox"/> Become empowered with the knowledge to comply with legal requirements | <input checked="" type="checkbox"/> Access critical tips on how to remain in compliance |
|--|---|---|

The most authoritative sources of Federal Employment Laws will instruct each session. Instructors are practitioners who actively litigate in Federal or State courts, or who work with agencies that interpret and enforce major laws prohibiting employment discrimination.

DEVELOP THE FOLLOWING LEADERSHIP COMPETENCIES

- Situational decision making through alternate dispute resolution
- The skills to avoid employment actions that lead to employer liability
- Greater insight into employment law decisions
- Conflict management skills in employment disputes
- Continual leadership development

This 2-day training program is perfect for managers, supervisors, Human Resource professionals, Equal Opportunity and ADA coordinators, Risk Managers, Attorneys and staff who want to understand the ongoing legal requirements of employment law. Cost: \$350.00

THE BOARD OF CONTINUING LEGAL & JUDICIAL
EDUCATION HAS ACCREDITED THIS SEMINAR FOR
13 GENERAL CLE CREDITS.

UPCOMING COURSE

April 14 & 15, 2004

US Environmental Protection Agency
999 East 18 Street, Second Floor
South Terrace Conference Room
Denver, CO

www.colorado.gov/dpa/dhr



DPA

Professional



Development Center

1313 Sherman Street
Denver, Co 80203
Phone: 303-866-2439
Fax: 303-866-2021

Email: carolyn.gable@state.co.us



THE GOVERNOR'S STAR AWARDS

TO BE HELD ON MAY 12, 2004

AWARDS LUNCHEON FROM 11 AM – 2 PM

AT THE ADAM'S MARK HOTEL

1550 COURT PL., DENVER

GRAND BALLROOM

**THE ATTACHED REGISTRATION FORM MUST BE COMPLETED
AND RECEIVED BY MAY 6, 2004**

2004 Governor's STAR Awards Luncheon Registration Form

May 12, 2004, 11am – 2pm at the Adam's Mark Hotel, 1550 Court Place, Denver

\$35.00 per person

Please FAX your completed registration form to 303-866-2021 or complete on-line

NAME: _____

GUEST OF: _____

AGENCY/COLLEGE: _____ DIVISION: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EXT.: _____ FAX: _____

E-MAIL: _____

CHECK IF YOU PREFER A VEGETARIAN PLATE _____

PARKING IS AVAILABLE AT HOTEL FOR \$4.00 PER HOUR; \$12.00 MAXIMUM

Registration must be received by close of business May 6, 2004

PAYMENT METHODS

PAYMENT IS DUE PRIOR TO ATTENDANCE

If paying by check: **Make check payable to STATE OF COLORADO, FEIN: 840644739 L, and mail it to the Department of Personnel and Administration, 1313 Sherman Street, Room 122, Denver, CO 80203, Attn: Judi Karg**

If paying with a COFRS IT Document: **Attach a copy of the IT YYY document set up to agency AQB, and complete the following information:**

FUND	AGENCY	ORG	SUB ORG	APPR	PROG	
FUNC	OBJECT	SUB OBJ	B/S ACCT	GBL	RPTG	JOB/PROJ

Accounting contact: _____ Phone number: _____ (required)

PAYMENT METHOD FOR GUESTS

Guests & spouses: Please make check payable to **STATE OF COLORADO** and mail it to Department of Personnel & Administration, 1313 Sherman Street, Rm. 122, Denver, CO 80203, Attn: Judi Karg
Credit cards cannot be accepted.

**** AFTER MAY 7, 2004, CANCELLATIONS WILL NOT BE ACCEPTED****
***** AGENCY WILL BE CHARGED FOR NO SHOWS OR LATE CANCELLATIONS*****

Please contact Judi Karg at 303-866-2391 or judi.karg@state.co.us with questions or if you require special accommodations.